

268660

STATE OF SOUTH CAROLINA )  
 )  
 (Caption of Case) )  
 Lifeline Eligible Telecommunications Carrier )  
 Certification Reports Filed in Conformance with FCC )  
 Order No. 12-11 (Lifeline and Link-up Reform and )  
 Modernization-Form 555) - TAG Mobile, LLC )  
 )  
 )  
 )  
 )  
 )  
 )

BEFORE THE  
 PUBLIC SERVICE COMMISSION  
 OF SOUTH CAROLINA

COVER SHEET

DOCKET  
 NUMBER: 2014 - 43 - C

(Please type or print)

Submitted by: Mark Lammert  
 Address: c/o Compliance Solutions, Inc.  
242 Rangeline Rd.  
Longwood, FL 32750

SC Bar Number: \_\_\_\_\_  
 Telephone: 407-260-1011  
 Fax: 407-260-1033  
 Other: \_\_\_\_\_  
 Email: regulatory@csilongwood.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

DOCKETING INFORMATION (Check all that apply)

- Emergency Relief demanded in petition       Request for item to be placed on Commission's Agenda expeditiously
- Other: FCC 555-TAG Mobile, LLC

INDUSTRY (Check one)	NATURE OF ACTION (Check all that apply)		
<input type="checkbox"/> Electric	<input type="checkbox"/> Affidavit	<input type="checkbox"/> Letter	<input type="checkbox"/> Request
<input type="checkbox"/> Electric/Gas	<input type="checkbox"/> Agreement	<input type="checkbox"/> Memorandum	<input checked="" type="checkbox"/> Request for Certification
<input type="checkbox"/> Electric/Telecommunications	<input type="checkbox"/> Answer	<input type="checkbox"/> Motion	<input type="checkbox"/> Request for Investigation
<input type="checkbox"/> Electric/Water	<input type="checkbox"/> Appellate Review	<input type="checkbox"/> Objection	<input type="checkbox"/> Resale Agreement
<input type="checkbox"/> Electric/Water/Telecom.	<input type="checkbox"/> Application	<input type="checkbox"/> Petition	<input type="checkbox"/> Resale Amendment
<input type="checkbox"/> Electric/Water/Sewer	<input type="checkbox"/> Brief	<input type="checkbox"/> Petition for Reconsideration	<input type="checkbox"/> Reservation Letter
<input type="checkbox"/> Gas	<input type="checkbox"/> Certificate	<input type="checkbox"/> Petition for Rulemaking	<input type="checkbox"/> Response
<input type="checkbox"/> Railroad	<input type="checkbox"/> Comments	<input type="checkbox"/> Petition for Rule to Show Cause	<input type="checkbox"/> Response to Discovery
<input type="checkbox"/> Sewer	<input type="checkbox"/> Complaint	<input type="checkbox"/> Petition to Intervene	<input type="checkbox"/> Return to Petition
<input checked="" type="checkbox"/> Telecommunications	<input type="checkbox"/> Consent Order	<input type="checkbox"/> Petition to Intervene Out of Time	<input type="checkbox"/> Stipulation
<input type="checkbox"/> Transportation	<input type="checkbox"/> Discovery	<input type="checkbox"/> Prefiled Testimony	<input type="checkbox"/> Subpoena
<input type="checkbox"/> Water	<input type="checkbox"/> Exhibit	<input type="checkbox"/> Promotion	<input type="checkbox"/> Tariff
<input type="checkbox"/> Water/Sewer	<input type="checkbox"/> Expedited Consideration	<input type="checkbox"/> Proposed Order	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Administrative Matter	<input type="checkbox"/> Interconnection Agreement	<input type="checkbox"/> Protest	
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Interconnection Amendment	<input type="checkbox"/> Publisher's Affidavit	
	<input type="checkbox"/> Late-Filed Exhibit	<input checked="" type="checkbox"/> Report	

Print Form

Reset Form

RECEIVED  
 FEB 08 2017  
 PSC SC  
 MAIL / DMS



January 31, 2017

Jocelyn Boyd, Chief Clerk of the Commission  
Public Service Commission of South Carolina  
Synergy Business Park  
Saluda Building  
101 Executive Center Drive  
Columbia, SC 29210

**RE: Docket No. 2014-43-C – FCC Form 555 – Annual Lifeline Eligible Telecommunications Carrier Certification on behalf of TAG Mobile, LLC**

Dear Staff,

Pursuant to FCC requirements under 47 C.F.R. § 54.416, enclosed please find for filing in the above-referenced docket a copy of TAG Mobile, LLC's FCC Form 555.

An extra copy of this letter is enclosed to be date-stamped and returned to us in the self-addressed, postage-paid envelope.

If you have any questions regarding this filing, please contact me at (407) 260-1011 or [regulatory@csilongwood.com](mailto:regulatory@csilongwood.com).

Respectfully submitted,

A handwritten signature in black ink that reads 'Mark Lammert'.

Mark Lammert  
Attorney-in-Fact  
TAG Mobile, LLC

**Annual Lifeline Eligible Telecommunications Carrier Certification Form**  
All carriers must complete all or portions of all sections  
Form must be submitted to USAC and filed with the Federal Communications Commission  
**IMPORTANT: PLEASE READ INSTRUCTIONS FIRST**  
*Deadline: January 31<sup>st</sup> (Annually)*

<p><u>249022</u></p> <p>Study Area Code (SAC) <i>(An Eligible Telecommunications Carrier (ETC) must provide a certification form for each SAC through which it provides Lifeline service).</i></p> <p><u>2016</u>                      <u>SC</u></p> <p>Recertification Year      State</p> <p><u>N/A</u>                              <u>—</u></p> <p>DBA, Marketing, or Other Branding Name <i>(If same as ETC name, list "N/A" Do not leave blank)</i></p>	<p><u>143035649</u></p> <p>Service Provider Identification Number (SPIN)</p> <p><u>TAG Mobile LLC</u></p> <p>ETC Name</p> <p><u>Amvensys Capital Group, LLC</u></p> <p>Holding Company Name <i>(If same as ETC name, list "N/A" Do not leave blank)</i></p>
---	---

Does the reporting company have affiliated ETCs?      Yes       No

*Provide a list of all ETCs that are affiliated with the reporting ETC, using page 4 and additional sheets if necessary. Affiliation shall be determined in accordance with Section 3(2) of the Communications Act. That Section defines "affiliate" as "a person that (directly or indirectly) owns or controls, is owned or controlled by, or is under common ownership or control with, another person." 47 U.S.C. § 153(2). See also 47 C.F.R. § 76.1200.*

Affiliated ETC's SAC	Affiliated ETC's Name

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

**Section 1: Initial Certification** *All ETCs must complete this section*

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial MC

**Section 2: Annual Recertification**

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	B	C	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year <i>(February data month)</i>	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were <u>initially</u> enrolled in the current Form 555 calendar year  <i>(These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)</i>	Number of subscribers de-enrolled prior to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
437	0	222	168	47

**Recertification Results:**

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non-responding subscribers	Number of subscribers responding that they are no longer eligible  <i>(This should be a subset of Block G.)</i>	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
47	11	36	0	36

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

**Certification:**

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial MC

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on: \_\_\_\_\_ (List database or name of administrator here) Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial \_\_\_\_\_

OR

C) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial \_\_\_\_\_

**Section 3: De-enroll Percentage**

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

<b>M = (F+K)</b>	<b>N = (J+L)</b>	<b>O = ((N + M) * 100)</b>
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC <i>(This should equal the number reported in Block E)</i>	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
47	36	76.6%

**Section 4: ETCs Subject to the Non-Usage Requirements**

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes  No

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

<b>P</b>	<b>Q</b>
Month	Subscribers De-Enrolled for Non-Usage
January	19
February	10
March	98
April	7
May	4
June	11
July	11
August	44
September	40
October	17
November	22
December	9
Total Subscribers	292

**Signature Block**

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.	
Signed,	Mary Calderon Vice President
<u>Certified Online</u>	Printed Name and Title of Officer
Signature of Officer	<u>02/01/2017</u>
<u>mary.calderon@tagmobile.com</u>	Date
Email Address of Officer	<u>407-260-1011</u>
<u>Mark Lammert</u>	Contact Phone Number
Person Completing This Certification Form	